

Application Data Sheet

Application Information

Filing Date:: **10/15/03**
Application Type:: **Regular**
Subject Matter:: **Utility**
Title:: **WAFERLESS FIBER FABRY-PEROT FILTERS**
Attorney Docket Number:: **113-02**
Request for Early Publication?:: **No**
Request for Non-Publication?:: **No**
Total Drawing Sheets:: **11**
Small Entity?:: **Yes**
Secrecy Order in Parent Appl.?:: **No**

Applicant Information

Applicant Authority type:: **Inventor**
Primary Citizenship Country:: **US**
Status:: **Full Capacity**
Given Name:: **Yufei**
Family Name:: **BAO**
City of Residence:: **Norcross**
State or Province of Residence:: **GA**
Street of mailing address:: **4090 Amberfield Circle**
City of mailing address:: **Norcross**
State or Province of mailing address:: **GA**
Country of mailing address:: **US**
Postal or Zip Code of mailing address:: **30092**

Applicant Information

Applicant Authority type:: **Inventor**
Primary Citizenship Country:: **US**

Status:: **Full Capacity**
Given Name:: **Steph n K.**
Family Name:: **FERGUSON**
City of Residence:: **Lawrenceville**
State or Province of Residence:: **GA**
Street of mailing address:: **2105 Versailles Place**
City of mailing address:: **Lawrenceville**
State or Province of mailing address:: **GA**
Country of mailing address:: **US**
Postal or Zip Code of mailing address:: **30043**

Applicant Information

Applicant Authority type:: **Inventor**
Primary Citizenship Country:: **US**
Status:: **Full Capacity**
Given Name:: **Donald Q.**
Family Name:: **SNYDER**
City of Residence:: **Marietta**
State or Province of Residence:: **GA**
Street of mailing address:: **3371 Fawn Trail**
City of mailing address:: **Marietta**
State or Province of mailing address:: **GA**
Country of mailing address:: **US**
Postal or Zip Code of mailing address:: **30066**

Correspondence Information

Correspondence Customer Number:: **23713**
Name:: **Greenlee, Winner and Sullivan, P.C.**
Street of mailing Address:: **5370 Manhattan Circle, Suite 201**
City of mailing address:: **Boulder**
State or Province of mailing address:: **CO**
Country of mailing address:: **US**
Postal or Zip Code of mailing address:: **80303**

Phone number:: **303-499-8080**
Fax number:: **303-499-8089**
E-Mail address:: **winner@gr nwin.com**

Representative Information

Representative Customer Number:	23713
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Domestic Priority Information

Application::	Continuity Type:	Parent Application::	Parent Filing Date::
This Application	an application claiming the benefit under 35 USC 119(e)	60/418,767	10/15/02

[Use "This Application" if the priority applies directly to the application being filed.
Use the application number if the priority relates to a previously filed application,
which is in turn related to the application being filed]